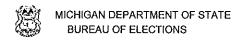


CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink an	d signed by	3. This Statement covers:					
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.		fro	_{om} 08/01/14	to	09/02/14	_	
1. Committee I.D. Number		Candidate Last Name	_	First Name	M.I.		
150579		Davis	Jo	=			
2. Committee Name		4a. Office Sought Including District # or Community Served (If applicable) 4th District County Commissioner					
Joe Davis For County Commissoner		4b. County of Residence BAY					
5. Committee's Mailing Address		6. Treasurer's Name & Residential Address					
909 N. Wenona Street		Ali Senk					
Bay City, MI 48706		405 S. Catherine Street Bay City, MI 48706					
Area Code and Phone If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.		Area Code & Phone	55				
7. Treasurer's Business Address		8. Designated Record Keeper	's Name and	Mailing Addre	ss (If the committee has a		
415 Washington Ave.		Designated Record Keeper) Joe Davis					
Bay City, MI 48708		989 N. Wenona St.					
		Bay City, MI 48706			v Man		
			-	CZA		*	
Area Code and Phone (989) 893-2831		Area Code and Phone (989) 860-1933		*** {%}		
9. TYPE OF STATEMENT	_	Alea Code and Filone		ution of Cand	Idate Committee		
9a. Pre-Election OR 9b. Post-Election	Required ONLY if candidate is not on the ballot for the current year:		By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here				
Pre-Election or Post-Election Statement relates to:			lby discharge	ed and forgive	n and no longer collectible fr nittee has no outstanding ass	rom	
☐ Primary	July Quart	erly	owes no late	es fees or has	any outstanding debt.	5010,	
⊠General	October Q	uarterly	Further if the	a dissolution o	annot be granted, that this b		
Convention			considered a	request for th	e Reporting Waiver.		
Special	9c. 🗀 .						
School		Statement () Coverage Year	Efi	fective date of	dissolution		
Caucus	9d. Amend	dment to Campaign Statement			·		
	(Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)		Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.				
Date of Election, Convention or Caucus		:					
11/04/14							
10. Verification: I/We certify that all reasonable dilige	 ence was used i	n the premaration of this stateme	nt and attach	ed schedules	(if any) and to the best of		
my\our knowledge and belief the contents are true, a	accurate and co	mplete.	. 1		•		
Current Treasurer or Designated Record Keeper Ali Senk		I NVANIA	Λ Λ		09-02-2014		
Type or Print Name		Signature	~ ~	—— Date			
Candidate Joe Davis				Date	09-02-2014		
Type or Print Name		Signature					

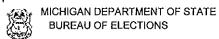


1. Committee I.D. Number 150579

SUMMARY PAGE **CANDIDATE COMMITTEE**

2. Committee Name _ Joe Davis For County Commissioner

RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>50.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$50.00	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$50.00	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ _\$99.64	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ \$1,795.56	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ \$50.00	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$1,845.56	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ \$99.64	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$1,745.92	*



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150579

2. Committee Name Joe Davis For County Commissioner

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.				6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)		
Contribution # 1 Name & Address:	PAC Receipt?		YES 4. Date of F	Receipt	08/01/14		
Thomas Niema 4058 Allen Ct. Bay City, MI 48						\$	_{\$} 50.00
5. If over \$100.00 cur		ovic	le:				
Occupation		_	Employer		<u>.</u>	Click Here fo	or Memo Itemization
Business Address							
Type of Contribution:	✓ Direct		Loan from a person		Fund Raiser		
3. Contribution #2	PAC Receipt?	Г	YES 4. Date of F	Receipt		1	
Name & Address			•				
						\$	\$
5. If over \$100.00 cum	nulative, please pro	vid	e:			Click Here fo	r Memo Itemization
Occupation		_ E	mployer				
Business Address							
Type of Contribution:	Direct		Loan from a person		Fund Raiser	_	
3. Contribution #3	PAC Receipt?		YES 4. Date of I	Receipt		-	
Name & Address:							
						\$	\$
						Oliale I I ana fan	. Manan Manalmatian
5. If over \$100.00 cum	nulative, please pro	vid	ə:			Click Here for	Memo Itemization
Occupation		- 1	Employer				
Business Address	7 51		<u> </u>	_			
Type of Contribution:	Direct	_	Loan from a person		Fund Raiser	1	
Contribution # 4 Name & Address	PAC Receipt?	L	YES 4. Date of	Receipt			
						\$	s
5. If over \$100.00 cum	ulativa niaga nra	4				-	7
	•					Click Here for	Memo Itemization
Occupation		-	Employer	····	-		
Business Address							
Type of Contribution:	Direct		Loan from a person		Fund Raiser		,
					Page Subtotal	\$50.00	
			10		Total of All Schedules 1A on last page of Schedule)	\$50.00	
Page1			O)	outhier	on last page of contentie)	Enter this total on line 3a of Summary Page.	-



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 150579

. Number

2. Committee Name Joe Davis For County Commissioner

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Sawicki & Son inc.		07/30/14	\$ 99.64
Address	Purpose: Sign stickers	Date	
1521 W. Lafayette Blvd.	Click H	lere for Memo	Itemization Type
Detroit, MI 48216	·		nonnauon typo
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name			\$
Address	Purpose:	Date	
	Click H	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name			
			\$
Address	Purpose:	Date	
	Click He	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4	didomon		
Name			
itanic			•
Address		Date	\$
Address	Purpose:		
	Click He	ere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name			
	_		\$
Address	Purpose:	Date	-
	Click He	ere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Subtota	ıl this page	\$99.64
	Grand Total of all So (Complete on last page o		\$99.64
		-	

Enter this total on line 8a of Summary Page

Page ____ of ___